Case 14-24333-SLM Doc 47 Filed 07/24/18 Entered 07/24/18 13:43:41 Desc Main

		DOGUITIENI	Paue I Ul I
Fill in this info	rmation to identify your	case:	
Debtor 1	Michel Pierre		
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse if, filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court for the:	DISTRICT OF NEW JERSEY	
Case number	14-24333 SLM		

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

info	es complete and accurate as possible. If two married people are filing together, both are equally responsible for In rmation. Fill out all of your schedules first; then complete the information on this form. If you are filing amend In original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
Par	t 1: Summarize Your Assets		
		Your ass Value of v	sets what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	0.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	0.00
Par	t 2: Summarize Your Liabilities		
		Your liab Amount y	
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	0.00
	Your total liabilities	\$	0.00
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,850.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,226.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sche	dules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal, fa	amily, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this	box and sub	mit this form to

the court with your other schedules.

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8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.

\$	0.00
1 '	

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	im
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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Fill	in this information to	identify your ca	ase:							
Del	otor 1	Michel Pierr	е			_				
	otor 2 buse, if filing)					_				
Uni	ted States Bankrupt	cy Court for the	: DISTRICT OF NEW J	ERSEY						
Cas	se number 14-2	24333 SLM					Check if this is:			
(If kr	nown)			-			An amende	d filing		
_									ng postpetition chap following date:	ter
<u>O</u>	fficial Form	<u> 1061</u>					MM / DD/ Y	YYY		
S	chedule I: \	our Ince	ome						1	12/15
spo atta	use. If you are sepa ch a separate shee	arated and you	are married and not filir r spouse is not filing w On the top of any additi	ith you, do not inclu	de infor	mati	on about your spo	use. If m	ore space is neede	ed,
1.	Fill in your emplo	yment		Debtor 1			Debtor 2	or non-f	filing spouse	
	If you have more to		Employment status	☐ Employed			☐ Emplo	yed		
	attach a separate information about		Employment status	■ Not employed			■ Not e	mployed		
	employers.		Occupation							
	Include part-time, self-employed wor		Employer's name							
	Occupation may in or homemaker, if it		Employer's address							
			How long employed t	here?						
Par	t 2: Give Det	ails About Mor	nthly Income							
	mate monthly inco use unless you are s		ate you file this form. If	you have nothing to re	eport for	any	line, write \$0 in the	space. In	nclude your non-filing	j
	u or your non-filing s e space, attach a se		ore than one employer, co	ombine the informatio	n for all	empl	oyers for that perso	n on the	lines below. If you ne	eed
	-	-					For Debtor 1		ebtor 2 or ling spouse	
2.			ry, and commissions (b calculate what the monthl		2.	\$	0.00	\$	0.00	
3.	Estimate and list	monthly overt	ime pay.		3.	+\$	0.00	+\$	0.00	

0.00

0.00

Calculate gross Income. Add line 2 + line 3.

Deb	tor 1	Michel Pierre			Case number (if known)	1	4-24333 S	LM	
					For Debtor 1		For Debtor		
	Cop	y line 4 here	4.		\$ 0.00		non-filing s \$	0.00	
_	•						·	0.00	
5.		all payroll deductions:	_				•		
	5a. 5b.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans	5a 5b		\$ 0.00 \$ 0.00	_	\$ \$	0.00	
	5c.	Voluntary contributions for retirement plans	50		\$ 0.00	_	\$	0.00	
	5d.	Required repayments of retirement fund loans	5d		\$ 0.00	-	\$	0.00	
	5e.	Insurance	5e) .	\$ 0.00	_	\$	0.00	
	5f.	Domestic support obligations	5f.		\$ 0.00	,	\$	0.00	
	5g.	Union dues	5g	J.	\$ 0.00	-	\$	0.00	
	5h.	Other deductions. Specify:	_ 5h	1.+	\$0.00	+ 5	\$	0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$ 0.00	- (\$	0.00	
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$ 0.00	- (\$	0.00	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	١.	\$ 0.00	;	\$	0.00	
	8b.	Interest and dividends	8b).	\$ 0.00	•	\$	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80		\$0.00	_	\$	0.00	
	8d.	Unemployment compensation	80		\$ 0.00	_	\$	0.00	
	8e. 8f.	Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8e		\$ <u>989.00</u> \$ 0.00	-	\$1, \$	0.00	
	8g.	Pension or retirement income	89		\$ 0.00	_	\$	0.00	
	8h.	Other monthly income. Specify: Son's Contribution	_ 8h _	1.+	\$ 900.00	_		0.00	
		Daughter's Contribution	_		\$ 300.00	_	\$	0.00	
		Nephew's Contribution	_	_	\$ 300.00		\$	0.00	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	:	\$2,489.00] [\$1	,361.00	
10.	Cald	culate monthly income. Add line 7 + line 9.	10.	\$	2,489.00 + \$		1,361.00	= \$	3,850.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		* -	2,100100		1,001100	-	0,000.00
11.	Stat Inclu	te all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your per friends or relatives. In the contribution of th	depe		.,	,			0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies						\$Combin	
13.	Do	you expect an increase or decrease within the year after you file this form	?					monthly	/ income
		No.							
		Yes. Explain: Social Security benefits are net amounts.							

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Fill	in this informa	ation to identify yo	our case:					
	tor 1	Michel Pierre)			Che ■		owing postpetition chapter
(Spo	ouse, if filing)						13 expenses as o	of the following date:
Unit	ed States Bank	ruptcy Court for the	DISTRI	CT OF NEW JERSEY			MM / DD / YYYY	
	e number 14	4-24333 SLM						
		orm 106J • J: Your I	Expen	ises				12/1:
Be info	as complete ormation. If m	and accurate as	possible. eded, atta	If two married people ar ch another sheet to this	re filing together, b form. On the top of	oth are eq f any addit	ually responsible ional pages, write	for supplying correct
Par		ribe Your House	hold					
1.		o line 2. es Debtor 2 live i	•	ate household? al Form 106J-2, <i>Expens</i> es	s for Separate House	ehold of De	btor 2.	
2.	Do you hav	e dependents?	■ No					
	Do not list D Debtor 2.	-	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state dependents							☐ No
3.	expenses o	penses include f people other t d your depende	han _	No Yes	-			_ Li Yes
Est	imate your ex		our bankrı	uptcy filing date unless y				napter 13 case to report of the form and fill in the
the		h assistance an		government assistance i luded it on <i>Schedule I:</i> \			Your ex	penses
4.		or home owners and any rent for the		ses for your residence. I r lot.	nclude first mortgag	e 4.	\$	0.00
	If not include	ded in line 4:						
	4b. Prope	estate taxes erty, homeowner's maintenance, re				4a. 4b. 4c.	\$	685.00 117.00 23.00
_	4d. Home	owner's associat	ion or cond	dominium dues		4d.	\$	0.00
5.	Additional i	mortgage payme	ents for yo	our residence, such as ho	me equity loans	5.	\$	0.00

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	Michel Pierre	Case num	ber (if known)	14-24333 SLM
6. Utilit i	ios:			
6. G tillti	Electricity, heat, natural gas	6a.	\$	300.00
6b.	Water, sewer, garbage collection	6b.	·	63.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.		100.00
6d.	Other. Specify:	6d.	·	0.00
	I and housekeeping supplies	ou. 7.	\$	
	rand nousekeeping supplies Icare and children's education costs		\$ ———	390.00
-		8.	*	0.00
	ning, laundry, and dry cleaning	9.	\$	50.00
	onal care products and services	10.	·	5.00
	cal and dental expenses	11.	\$	15.00
	sportation. Include gas, maintenance, bus or train fare. ot include car payments.	12.	\$	120.00
	rtainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
	itable contributions and religious donations	14.	· -	0.00
5. Insur	•		Ŧ	0.00
	of include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	66.00
15b.	Health insurance	15b.	\$	0.00
	Vehicle insurance	15c.	· -	292.00
	Other insurance. Specify:	15d.		0.00
	s. Do not include taxes deducted from your pay or included in lines 4 or 20.		•	<u> </u>
Spec	ify:	16.	\$	0.00
	Ilment or lease payments:	170	¢.	0.00
	Car payments for Vehicle 1	17a.	·	0.00
	Car payments for Vehicle 2	17b.	·	0.00
	Other. Specify:	17c.	·	0.00
	Other. Specify:	17d.	\$	0.00
	payments of alimony, maintenance, and support that you did not report as acted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	i 18.	\$	0.00
0 Othe	r payments you make to support others who do not live with you.		\$	0.00
Speci		19.	Ψ	0.00
	r real property expenses not included in lines 4 or 5 of this form or on Scho		our Income.	
	Mortgages on other property	20a.		0.00
	Real estate taxes	20b.	·	0.00
	Property, homeowner's, or renter's insurance	20c.	·	0.00
	Maintenance, repair, and upkeep expenses	20d.	·	0.00
	Homeowner's association or condominium dues	20a.	· -	0.00
	r: Specific	206.	·	
	· · · -		тф	0.00
	ulate your monthly expenses		•	
	Add lines 4 through 21.		\$	2,226.00
22b. (Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c. /	Add line 22a and 22b. The result is your monthly expenses.		\$	2,226.00
3. Calcı	ulate your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	3,850.00
	Copy your monthly expenses from line 22c above.	23b.	-\$	2,226.00
	177			
23c.	Subtract your monthly expenses from your monthly income.			4 00 4 00
	The result is your monthly net income.	23c.	\$	1,624.00
o				
	ou expect an increase or decrease in your expenses within the year after your			
For ex	kample, do you expect to finish paying for your car loan within the year or do you expect you ication to the terms of your mortgage?	r mortgage	payment to incre	ease of decrease because of a
For ex	cation to the terms of your mortgage?	r mortgage	payment to incre	ease of decrease because of a

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Fill in this infor	mation to identify your	case:		
Debtor 1	Michel Pierre			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	DISTRICT OF NEW JERSEY		
Case number	14-24333 SLM			
(if known)				Check if this is an
				amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below	
Die	d you pay or agree to pay someone who is	OT an attorney to help you fill out bankruptcy forms?
	No	
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notic Declaration, and Signature (Official Form 1
	der penalty of perjury, I declare that I have t they are true and correct.	ad the summary and schedules filed with this declaration and
Х	/s/ Michel Pierre	x
	Michel Pierre	Signature of Debtor 2
	Signature of Debtor 1	